

PATENT APPLICATION SERIAL NO. 10/088250

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

03/22/2002 LLANDGRA 00000053 181982 10088250

|           |            |
|-----------|------------|
| 01 FC:970 | 890.00 CH  |
| 02 FC:966 | 2142.00 CH |
| 03 FC:964 | 252.00 CH  |

JC10 Rec'd PCT/PTO 14 MAR 2002

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| FORM PTO-1390 U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE<br>(REV. 10-2000)  |  | ATTORNEY'S DOCKET NUMBER<br><br><b>HMR2023 US PCT</b><br><br>U.S. APPLICATION NO.<br><small>(If known, See 37 C.F.R. 1.5)</small><br><div style="font-size: 1.5em; font-weight: bold;">10/088250</div>              |
| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>         DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>         CONCERNING A FILING UNDER 35 U.S.C. 371</b>  |  |   |
| INTERNATIONAL APPLICATION NO.<br><br>PCT/US00/24962  | INTERNATIONAL FILING DATE<br>13 September 2000<br>(13.09.00) | PRIORITY DATE CLAIMED<br>14 September 1999 (14.09.99)   |
| TITLE OF INVENTION<br>THIENOISOXAZOLYL-AND THIENYLPYRRAZOLYL-PHENOXY SUBSTITUTED PROPYL DERIVATIVES USEFUL AS D4 ANTAGONISTS   |  |   |
| APPLICANT(S) FOR DO/EO/US<br>David M. Fink; Brian S. Freed; Nicholas J. Hrib; Raymond W. Kosley, Jr.; George E. Lee; Gregory H. Merriman; Barbara S. Rauckman  |  |   |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:  |  |   |
| 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.<br>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.<br>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(1).<br>4. <input checked="" type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.<br>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))<br>a. <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau).<br>b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau.<br>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US)<br>6. <input type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)).<br>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))<br>a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).<br>b. <input type="checkbox"/> have been transmitted by the International Bureau.<br>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br>d. <input type="checkbox"/> have not been made and will not be made.<br>8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).<br>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)), and Power of Attorney. ( <b>Unexecuted</b> )<br>10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).<br>Items 11. to 16. below concern other document(s) or information included:<br>11. <input type="checkbox"/> An information Disclosure Statement under 37 CFR 1.97 and 1.98.<br>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.<br>13. <input checked="" type="checkbox"/> A FIRST preliminary amendment.<br><input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.<br>14. <input type="checkbox"/> A substitute specification.<br>15. <input type="checkbox"/> A change of power of attorney and/or address letter.<br>16. <input type="checkbox"/> Other items or information: |  |   |
| CERTIFICATION UNDER 37 CFR 1.10  |  |   |
| "Express Mail" Mailing Number <u>EL 916211007 US</u><br>I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Box PCT, Assistant Commissioner for Patents, Washington, D.C. 20231, Attn. EO/US<br><div style="border-top: 1px solid black; width: 100%;"> <span style="display: block; text-align: center;">Generia Walker</span> </div> (Type or print name of person mailing paper)   |  | Date of Deposit <u>March 14, 2002</u><br><div style="border-top: 1px solid black; width: 100%;"> <span style="display: block; text-align: center;">Generia Walker</span> </div> (Signature of person mailing paper) |

10/088250  
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| U.S. APPLICATION NO.<br>(If Known, see C.F.R. 1.5)<br><b>10/088250</b>   |              | INTERNATIONAL APPLICATION NO.  |  | ATTORNEY'S DOCKET NUMBER<br>HMR2023 US PCT |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
|--|--------------|--|--|--|------------|--------|--------------|--------------|------|--|--------------|------------|-----|------------|------------|--------------------|---------|---|------------|-----------|---|--|--|------------|----|--------------------------------------|--|--|--|-------------------|--|--|--|--|----|-------------------|--|--|--|-----------|---|--|--|--|----|-----------------------------|--|--|--|-------------------|--|--|--|--|----|------------------------------|--|--|--|-----------|--|--|--|--|-----------------------|----|
| 17. <input checked="" type="checkbox"/> The following fees are submitted:<br>Basic National Fee (37 CFR 1.492(a)(1)-(5):<br>Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445 (a)(2) paid to USPTO and International Search Report not prepared by the EPO or JPO..... <b>\$1000.00</b><br>International preliminary examination fee paid to USPTO (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO..... <b>\$890.00</b><br>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2) paid to USPTO..... <b>\$710.00</b><br>International preliminary examination fee paid to USPTO (37 CFR 1.482) but all claims did not satisfy provisions of PCT Article 33(1)-(4)..... <b>\$690.00</b><br>International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(1)-(4)..... <b>\$100.00</b><br><div style="text-align: right;"><b>ENTER APPROPRIATE BASIC FEE AMOUNT =</b></div> |              | CALCULATIONS <span style="float: right;">PTO use only</span>   |  |  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
|  |              | Surcharge of \$130.00 for furnishing the oath or declaration later than [ ] 20 [ ] 30 months from the earliest claimed priority date (37 CFR 1.492(e)).<br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:20%;">Claims</th> <th style="width:20%;">Number Filed</th> <th style="width:20%;">Number Extra</th> <th style="width:20%;">Rate</th> <th style="width:20%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>139 - 20 =</td> <td>119</td> <td>X \$ 18.00</td> <td>\$ 2142.00</td> </tr> <tr> <td>Independent Claims</td> <td>6 - 3 =</td> <td>3</td> <td>X \$ 84.00</td> <td>\$ 252.00</td> </tr> <tr> <td colspan="3">Multiple dependent claim(s) (if applicable)</td> <td>+ \$270.00</td> <td>\$</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>TOTAL OF ABOVE CALCULATIONS =</b></td> <td><b>\$ 3284.00</b></td> </tr> <tr> <td colspan="4">Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity statement must also be filed. (Note 37 CFR 1.9, 1.27, 1.28).</td> <td>\$</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL =</b></td> <td><b>\$</b></td> </tr> <tr> <td colspan="4">Processing fee of \$130.00 for furnishing the English translation later the [ ] 20 [ ] 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</td> <td>\$</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>TOTAL NATIONAL FEE =</b></td> <td><b>\$ 3284.00</b></td> </tr> <tr> <td colspan="4">Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property +</td> <td>\$</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>TOTAL FEES ENCLOSED =</b></td> <td><b>\$</b></td> </tr> <tr> <td colspan="4" rowspan="2"></td> <td style="text-align: right;">Amount to be refunded</td> <td>\$</td> </tr> <tr> <td style="text-align: right;">charged</td> <td>\$ 3284.00</td> </tr> </tbody></table> |  |  |            | Claims | Number Filed | Number Extra | Rate |  | Total Claims | 139 - 20 = | 119 | X \$ 18.00 | \$ 2142.00 | Independent Claims | 6 - 3 = | 3 | X \$ 84.00 | \$ 252.00 | Multiple dependent claim(s) (if applicable) |  |  | + \$270.00 | \$ | <b>TOTAL OF ABOVE CALCULATIONS =</b> |  |  |  | <b>\$ 3284.00</b> | Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity statement must also be filed. (Note 37 CFR 1.9, 1.27, 1.28). |  |  |  | \$ | <b>SUBTOTAL =</b> |  |  |  | <b>\$</b> | Processing fee of \$130.00 for furnishing the English translation later the [ ] 20 [ ] 30 months from the earliest claimed priority date (37 CFR 1.492(f)). |  |  |  | \$ | <b>TOTAL NATIONAL FEE =</b> |  |  |  | <b>\$ 3284.00</b> | Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property + |  |  |  | \$ | <b>TOTAL FEES ENCLOSED =</b> |  |  |  | <b>\$</b> |  |  |  |  | Amount to be refunded | \$ |
| Claims   | Number Filed | Number Extra   | Rate   |  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| Total Claims   | 139 - 20 =   | 119  | X \$ 18.00   | \$ 2142.00                                 |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| Independent Claims   | 6 - 3 =      | 3  | X \$ 84.00   | \$ 252.00                                  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| Multiple dependent claim(s) (if applicable)  |              |  | + \$270.00   | \$   |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>   |              |  |  | <b>\$ 3284.00</b>                          |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity statement must also be filed. (Note 37 CFR 1.9, 1.27, 1.28).   |              |  |  | \$   |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| <b>SUBTOTAL =</b>  |              |  |  | <b>\$</b>                                  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
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| <b>TOTAL NATIONAL FEE =</b>  |              |  |  | <b>\$ 3284.00</b>                          |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
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| <b>TOTAL FEES ENCLOSED =</b>   |              |  |  | <b>\$</b>                                  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
|  |              |  |  | Amount to be refunded                      | \$         |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
|  |              |  |  | charged                                    | \$ 3284.00 |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| a. <input type="checkbox"/> A check in the amount of \$_____ to cover the above fee is enclosed.<br>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>18-1982</u> in the amount of \$ <u>3284.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>18-1982</u> . A duplicate copy of this sheet is enclosed.  |              |  |  |  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| <b>NOTE:</b> Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.   |              |  |  |  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |
| SEND ALL CORRESPONDENCE TO:<br><br>Customer No. 005487   |              |  | Signature <u>Barbara E. Kurys</u><br>Name <u>Barbara E. Kurys</u><br>Registration Number <u>34,650</u><br>Date <u>March 14, 2002</u> |  |            |        |              |              |      |  |              |            |     |            |            |                    |         |   |            |           |   |  |  |            |    |                                      |  |  |  |                   |  |  |  |  |    |                   |  |  |  |           |   |  |  |  |    |                             |  |  |  |                   |  |  |  |  |    |                              |  |  |  |           |  |  |  |  |                       |    |